

Koland, Heather N

From: Koland, Heather N
Sent: Wednesday, February 26, 2025 5:12 PM
To: Sharon Stewart; Maddox, Amie; Frisk, Ronald; Jorud, Cynthia R; Mlodozyniec, Shari R.; Faucher, Heather; Wade O. Mcdowell; Carrissa Slominski (Carrissa.slominski@gmail.com); Dallas Aune (daune@riverviewhealth.org); Jana Becker; Shelley Bakke; Michelle Earl; Knudsen, Kristin; Gothberg, Lynn A; McMaines, Mackenzie; Helland, Troy L; Hiltz, Brian K; Daniels, Kati Jo J; Mohamad.Bit@altru.org; ashley.larson@essentiahealth.org
Cc: LeDuc, Stephanie L
Subject: Northland Community and Technical College Respiratory Therapy Advisory Committee

Hello all,

I wanted to reach out just to touch base because it has been so long since we met and I hope everyone survived the winter. I just wanted to let you know that things have been moving along here which has left us with little time for anything else. Here are a few highlights.

1. I would like to welcome Dr. Mohamed Bitar to our group, he is taking the place of Dr. Al-Abid as our Medical Director. We have not asked him to do much as of yet but we are thankful that he was willing to help us on our endeavor to fill the world with new respiratory therapists.
2. After the last communication we did increase our cohort cap to 36. Accreditation allows us to have a 10% buffer so we were able to accept 40 incoming first year students in the Fall of 2024. Over the course of the fall term we did lose a couple but we still currently have 37 enrolled in the first year. 23 of them are in the St. Cloud section and 14 of them are in the on campus section. Which when I did the math that is a 137% increase from where we were. We are still trying learning how to navigate such large cohorts but everything is moving in the right direction.
3. With the increase in enrollment we needed to increase our staff. We have recently hired Mackenzie McMaines for our on campus section, which brings our on campus faculty to 4, to include Myself, Kristin Knudsen, Lynn Gothberg, and then Mackenzie. Our St. Cloud section includes Kati Jo Daniels, and we have brought on board Brian Hiltz, and Troy Helland. We are also working on building our substitute pool to help on days we may have conflicts in scheduling. We are finding that with faculty working full time in acute care its hard to work extra days in without having those same people working several days in a row, but the incredible faculty that we have found, have taken a large amount of clinical days and labs and made them work within their schedules. But if there is anyone that wants to, or knows someone who would want to, be a sub and pick up a clinical or lab shift or 2 please let me know, the only requirement is that you have to have an RT degree and hold a current state license. The going rate for subs is \$50/hour. We are working on trying to get approval to hire a third fulltime faculty member but for now we will continue to utilize our adjunct and substitutes as we can.
4. Our annual report was submitted for last year and after a back log at CoArc we got it back in September and were good for another year. I will begin filling out our annual report for the 2024-2025 year closer to April. So please be on the lookout for the surveys that I will be sending out. We need everyone's feedback to be in compliance with accreditation.
5. We are working with several hospitals to help them in their staffing needs. Alomere Health in Alexandria, MN, Sanford in Bemidji, MN, CentraCare in St. Cloud, MN, Trinity Hospital in Minot, ND, Altru Health System in Grand Forks, ND, have all been working on sponsoring students to come to our program. These students will then be

placed in jobs within the sponsoring hospitals after graduation. We are also working with Minneapolis Children's hospital to establish a partnership and I was also approached by St. Joseph's hospital in Park Rapids for information regarding sending students to us as well. So the interest in our program is most certainly growing.

6. While we are on the topic of enrollment and students. I currently have about 25 or so applications waiting for my attention for the fall semester and we get 1 to 2 more each day. So I am very optimistic that we will have a full cohort again next fall since we have so many applications and it is only February. I will also be looking at our enrollment process, because of the increase in applications and becoming a more competitive choice for RT schooling we have the opportunity to be more selective in the students that we enroll. I will be looking at application processes that other programs, here at Northland use, to determine the best course of action to take moving forward.
7. The bonding project and lab remodel has started and we have officially been relocated to a temporary lab space on the East Grand Forks campus. As you can see from the pictures we are down to the studs and the floor is gone. Hopefully over spring break a lot more work will get done since no one will be on campus. My goal is, once the build is complete and we are up and running, is to have an onsite advisory committee meeting and open house for everyone to come and see the new space. I was very happy they were able to keep us on the East Grand Forks campus versus being relocated to the Thief River Falls campus while under construction. Albeit that our space is smaller it is better than driving back and forth in the winter.



8. We were approved for a few more pieces of equipment this year. We were able to obtain a complete PFT machine from Pulmonex. This machine will allow us to teach complete PFT to students without the need for a body box and it should be on campus by next week. We also were able to obtain a couple of carts to create an airway type cart and an isolation cart as well as a ventilator to go along with our neonatal jet ventilator. A NICU Giraffe incubator/warmer and new ER cart/gurney will also be arriving in the next few weeks. All of these things will help us in our new lab space to function more like a simulated hospital. If anyone has any equipment or supplies they would like to donate to us please let me know, one man's trash is another man's treasure. I would also like to give a huge shout out to Altru, Essentia Fargo, CentraCare, and Alomere for any and all supplies and equipment that they have sent to help us get current with our supplies and equipment, it is very much appreciated.
9. Now for the last bit of information. Our current Dean of Health, Public Services, and Technical Programs, Stephanie LeDuc is leaving us and I have been appointed and accepted to be her replacement for the interim. What does that mean, well it means that I will be doing less in the classroom and more on the administrative side. I will still continue to be the Respiratory Therapy Program Director, as our accreditation is ok with me having dual roles, as long as it is stated in writing that I will have time to execute the roles and responsibilities of the program. That was discussed with our current administration and it was included in the contract. This is a temporary appointment and is scheduled to last until June 2025, barring we find a replacement. I am eligible to apply for the fulltime permanent position and may do so but I am only on day 3 of on boarding and still getting my feet wet, so it is too soon to say for sure what my plans will be and we will cross that bridge when we come to it. I will be relying on my current program faculty to help during this transition

time and Kristin has agreed to take on some of my course load. If it wasn't for all of the strong faculty that I have working in this program this opportunity would not have been possible.

If any one has any other questions, comments, concerns please do not hesitate to reach out to me. Because of all the craziness that is going on right now this email will serve as our "official" meeting for the spring. My plan is to keep everyone informed of the plans and processes over the summer and have a formal meeting in the fall in our new space.

Heather Koland RRT, BSRT, MSRT
Program Director/Instructor
Respiratory Therapy Program

Northland Community & Technical College

2022 Central Ave
East Grand Forks, MN 56721

O: (218) 793-2584

M: (701) 741-5467

F: (218) 793-2842

heather.koland@northlandcollege.edu | www.northlandcollege.edu

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